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OFFICIAL

Atty. Docket No. 89317

PTO FAX NO.: 703/872-9306

ATTENTION: Examiner John P. Leubecker  
TELEPHONE NO.: 703/308-0951

Group Art Unit 3739

**OFFICIAL COMMUNICATION  
FOR THE PERSONAL ATTENTION OF  
EXAMINER LEUBECKER**

**CERTIFICATION OF FACSIMILE TRANSMISSION**

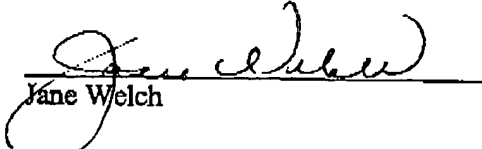
I hereby certify that the following document(s) in re Application of Ingo F. Herrmann, Application No. 09/913,617, filed for DEFORMABLE FIBERSCOPE WITH A DISPLACEABLE SUPPLEMENTARY DEVICE, is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Document(s) Attached

1. Fee Transmittal
2. Amendment and Request for Reconsideration After Final Under 37 CFR 1.116 (Expedited Procedure - Examining Group 3739)

Number of pages being transmitted, including this page: 13

Dated: February 9, 2004

  
Jane Welch

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60137339 v1

PTO/SB/17 (10-03)

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 55

## Complete if Known

Application Number 09/813,617  
 Filing Date January 8, 2002  
 First Named Inventor Hermann, Ingo F.  
 Examiner Name John P. Leubecker  
 Art Unit 3739  
 Attorney Docket No. 89317

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 20-1430

Deposit Account Name Townsend and Townsend and Crew LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

**FEE CALCULATION**

**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	770	Utility filing fee	
		1002	340	Design filing fee	
		1003	530	Plant filing fee	
		1004	770	Reissue filing fee	
		1005	160	Provisional filing fee	
SUBTOTAL (1)					(\$)

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims			
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1202	16	Claims in excess of 20	
		1201	86	Independent claims in excess of 3	
		1203	290	Multiple dependent claim, if not paid	
		1204	86	** Reissue independent claims over original patent	
		1205	18	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$)

\*\* or number previously paid, if greater; For Reissues, see above

**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1051	130	Surcharge - late filing fee or oath	
		1052	50	Surcharge - late provisional filing fee or cover sheet	
		1053	130	Non-English specification	
		1812	2,520	For filing a request for reexamination	
		1804	920*	Requesting publication of SIR prior to Examiner action	
		1805	1,840*	Requesting publication of SIR after Examiner action	
		1251	110	Extension for reply within first month	55
		1252	420	Extension for reply within second month	
		1253	950	Extension for reply within third month	
		1254	1,480	Extension for reply within fourth month	
		1255	2,010	Extension for reply within fifth month	
		1401	330	Notice of Appeal	
		1402	330	Filing a brief in support of an appeal	
		1403	290	Request for oral hearing	
		1451	1,510	Petition to institute a public use proceeding	
		1452	110	Petition to revive - unavoidable	
		1453	1,330	Petition to revive - unintentional	
		1501	1,330	Utility issue fee (or reissue)	
		1502	480	Design issue fee	
		1503	840	Plant issue fee	
		1480	130	Petitions to the Commissioner	
		1807	50	Petitions related to provisional applications	
		1808	180	Submission of Information Disclosure Sheet	
		8021	40	Recording each patent assignment per property (times number of properties)	
		1809	770	Filing a submission after final rejection (37 CFR § 1.129(a))	
		1810	770	For each additional invention to be examined (37 CFR § 1.129(b))	
		1801	770	Request for Continued Examination (RCE)	
		1802	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$55)

**SUBMITTED BY**

Name (Print/Type)	Registration No. (Attorney/Agent)	Telephone
J. Georg Seka	24,491	415-576-0200
Signature		Date February 9, 2004

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